

# BEST AVAILABLE COPY

POSTAGE AND FEE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW		48 49452	11/29/00
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

Rejected N ..... Non-elected  
 Allowed I ..... Interference  
 (Through numeral) Canceled A ..... Appeal  
 Restricted O ..... Objected

Claim	Final	Original	Date
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if more than 150 claims or 10 actions  
staple additional sheet here

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